

# Agenda

## City of Middletown Planning Board

October 4, 2023  
7:00 PM to 10:00 PM  
Common Council Chambers  
and via Digital Town Hall

**Meeting called by:** Anthony Capozella, Planning Board Chairman  
**Clerk:** Martina Tu, Clerk

**Members:** Nicole Hewson, Dan Higbie, Richard McCormack, Gretchen Witt,  
Anthony Capozella, Andy Britto, Dave Madden

Approval of August 2, 2023 minutes

Juan Cosme  
24 East Main Street  
an eating and drinking establishment

Adriana Becerra  
102-104 North Street, Suite A  
a bakery/eating & drinking establishment

Mohammed Alshoja  
132 Wickham Avenue  
Deli/grocery

Sound of Hope Radio Network  
45-51 Academy Avenue (2nd floor)  
offices

# APPLICATION

## PLANNING BOARD

### City of Middletown, New York

Date deemed complete \_\_\_\_\_  
Accepted by \_\_\_\_\_

Date 08/17/2023

*Items 1, 2 and 3 are required to be completed*

1. Address of Subject Property 24 East Main St Middletown NY 10940

Section 35 Block 5 Lot 5

Current Zoning District DMU

Building Existing  New \_\_\_\_\_

2. Owner of Property Hing Middletown, LLC

Owner's Address 18-24 East Main,

City Middletown State NY Zip 10940

Phone numbers: Home: \_\_\_\_\_

Business: \_\_\_\_\_

Cell: 917 250 5698

3. Applicant name Antojitos del Mangu Middletown Rest. Corp  
*If different from Owner*

Applicants Address 24 East main st

City Middletown State NY Zip 10940

Phone numbers: Home: \_\_\_\_\_

Business: 845 343 5565

Cell: 347 366 4705

Fax: \_\_\_\_\_

Answer 4, 5 or 6

4. **Special Use Permits/Site Plan Approval.** An approval for a special use permit and/or site plan approval is hereby requested. In the space provided indicate the section(s) and classification(s) of the occupancy for which you are seeking a special use permit. Included all uses which are currently or will be in the subject property. All dimensions shall be listed in the space provided. Refer to the tables at the rear of the Zoning Ordinance for requirements in UR-3, SR-3, SR-3A and SR-3B districts. Additional sheets may be attached if required.

Section # \_\_\_\_\_

Classification of Occupancy requested \_\_\_\_\_

Description of what you are requesting: Dominican, Fry fish,  
Soulfood and wine and beer.

Uses currently in property: Fry FISH & Soulfood

Title	Section Number	Required Dimensions	Actual Dimensions
Lot area			
Front yard			
Rear yard			
Side yard			
Side yard			
Parking			

*Answer this section only for multiple dwellings*

Lot coverage \_\_\_\_\_  
Building height \_\_\_\_\_  
Open Space \_\_\_\_\_  
Playlot \_\_\_\_\_  
Livable floor area \_\_\_\_\_  
Number of Bedrooms \_\_\_\_\_

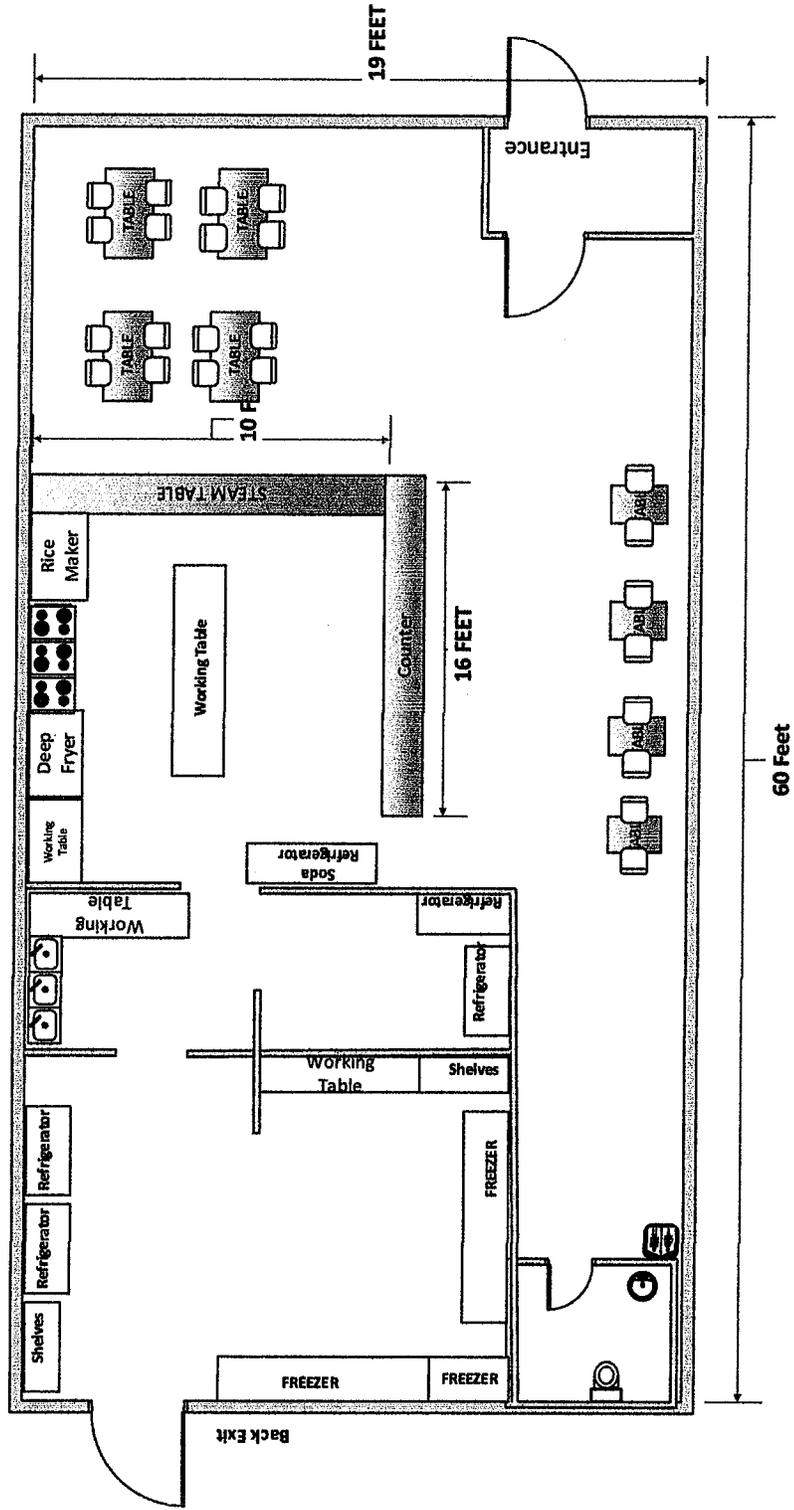
5. **Nonconforming Use.** In the area provided, list each use for which an expansion is sought and the reason therefore. State the current use and all conditions that presently exist and those



Printed Name and Title: Juan Cosme (President)

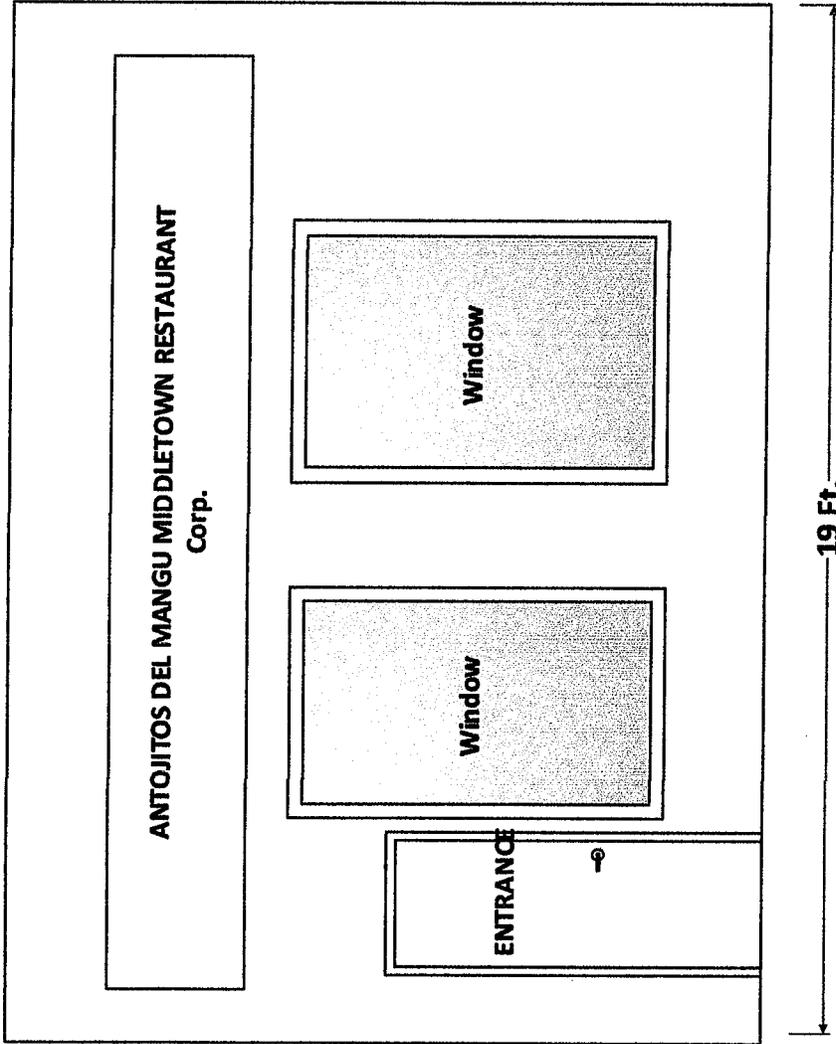
Date: 08/17/2023

**DIAGRAM OF INTERIOR**  
**1<sup>st</sup> Floor**  
**Antojito Del Mangu Middletown Restaurant Corp.**



1140 s.f.

# FRONT ELEVATION DIAGRAM



# APPLICATION

## PLANNING BOARD

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Date deemed complete \_\_\_\_\_  
 Accepted by \_\_\_\_\_

Date \_\_\_\_\_

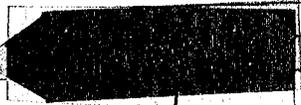
*Items 1, 2 and 3 are required to be completed*

1. Address of Subject Property 102-104 North St, Middletown, NY Unit A  
 Section 25 Block 12 Lot 7 Current Zoning District DMU  
 Building Existing  New \_\_\_\_\_

2. Owner of Property Ji li  
 Owner's Address 102 North St,  
 City Middletown State NY Zip 10490

Phone numbers: Home: \_\_\_\_\_  
 Business: \_\_\_\_\_  
 Cell: (740) 590-2753

3. Applicant name AC  
 If different fr. \_\_\_\_\_  
 Applicants Address \_\_\_\_\_ Dr \_\_\_\_\_  
 City Pawling state NY Zip 12564

Phone numbers: Home: \_\_\_\_\_  
 Business: \_\_\_\_\_  
 Cell:  \_\_\_\_\_  
 Fax: \_\_\_\_\_

Answer 4, 5 or 6

4. **Special Use Permits/Site Plan Approval.** An approval for a special use permit and/or site plan approval is hereby requested. In the space provided indicate the section(s) and classification(s) of the occupancy for which you are seeking a special use permit. Included all uses which are currently or will be in the subject property. All dimensions shall be listed in the space provided. Refer to the tables at the rear of the Zoning Ordinance for requirements in UR-3, SR-3, SR-3A and SR-3B districts. Additional sheets may be attached if required.

Section # \_\_\_\_\_

Classification of Occupancy requested Bakery, Eating & Drinking

Description of what you are requesting: M 6-8pm, SUN 6:30-8pm  
TUE - FRIDAY 6AM-9PM.

Uses currently in property: \_\_\_\_\_

Title	Section Number	Required Dimensions	Actual Dimensions
Lot area			
Front yard			
Rear yard			
Side yard			
Side yard			
Parking			

*Answer this section only for multiple dwellings*

Lot coverage \_\_\_\_\_

Building height \_\_\_\_\_

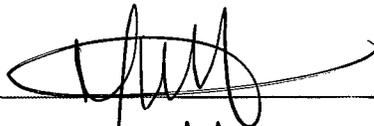
Open Space \_\_\_\_\_

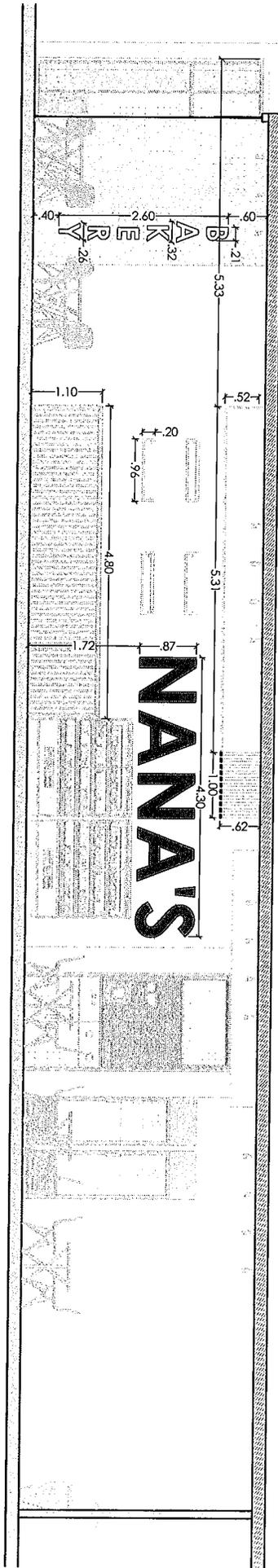
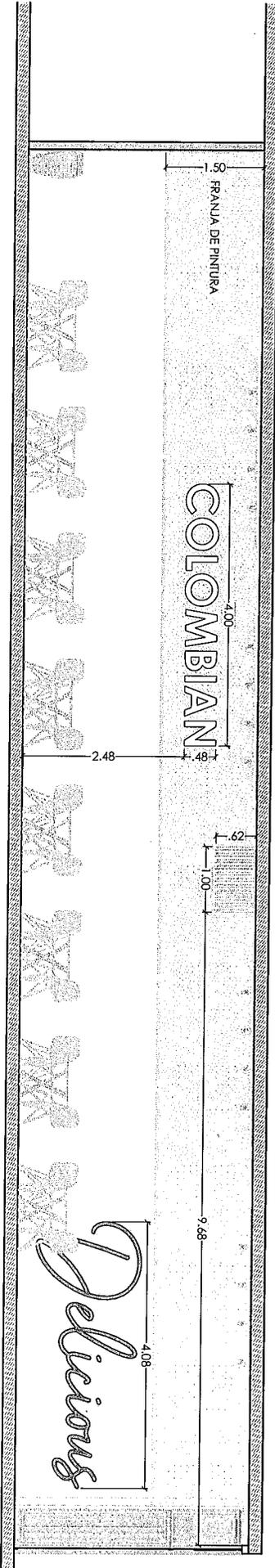
Playlot \_\_\_\_\_

Livable floor area \_\_\_\_\_

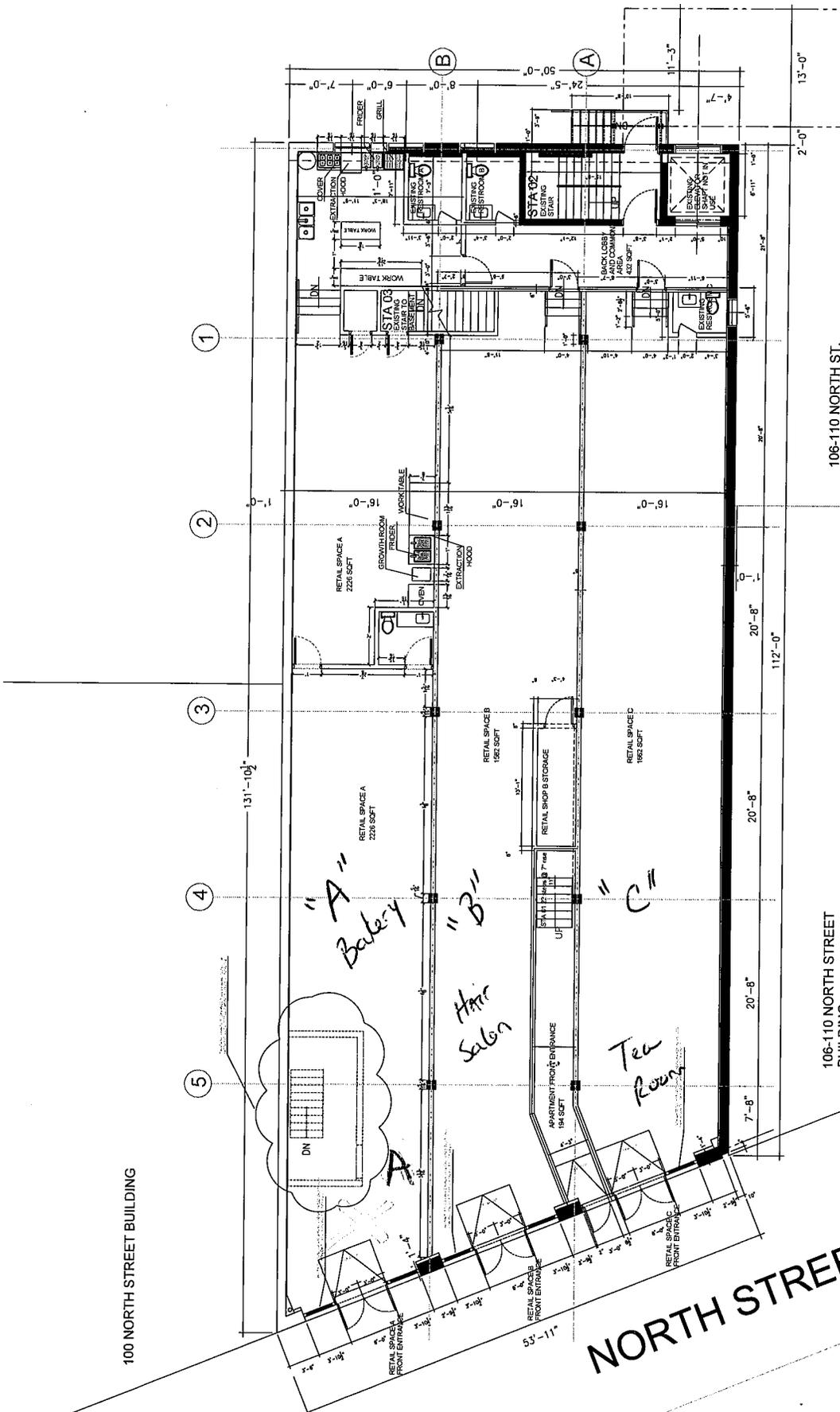
Number of Bedrooms \_\_\_\_\_



Signature:  \_\_\_\_\_  
Printed Name and Title: Maia Sierra manager  
Date: 9/14/23



REVISIONS	
NO.	DESCRIPTION
1	ISSUE FOR PERMIT
2	ISSUE FOR PERMIT
3	ISSUE FOR PERMIT
4	ISSUE FOR PERMIT
5	ISSUE FOR PERMIT



106-110 NORTH ST. REAR PARKING LOT  
**PROPOSED FIRST FLOOR PLAN**  
106-110 NORTH STREET BUILDING



TOTAL FIRST FLOOR BUILDING AREA : 6,095 SQFT  
FIRST FLOOR NET AREA : 5,594 SQFT  
TOTAL BUILDING AREA : 12,190 SQFT

100 NORTH STREET BUILDING

NORTH STREET

CODE ADOPTION RESOLUTION CODE ADOPTION COMMENTS  
DATE OF ADOPTION  
APPROVED BY  
DATE OF ADOPTION  
APPROVED BY

# APPLICATION

## PLANNING BOARD

### City of Middletown, New York

Date deemed complete \_\_\_\_\_  
Accepted by \_\_\_\_\_

Date Aug 7, 2023

*Items 1, 2 and 3 are required to be completed*

1. Address of Subject Property 132 Wickham Ave

Section 26 Block 2 Lot 1

Current Zoning District C-2

Building Existing  New \_\_\_\_\_

2. Owner of Property 132 Wickham Ave. LLC

Owner's Address PO Box 871

City Mosby State NY Zip 10952

Phone numbers: Home: \_\_\_\_\_

Business: 845-352-0020

Cell: 845-642-3574

3. Applicant name Mohammed Alshojq

*If different from Owner*

Applicants Address 382 North 66 # 11

City Middletown State NY Zip 10940

Phone numbers: Home: \_\_\_\_\_

Business: \_\_\_\_\_

Cell: 347-417-6931

Fax: \_\_\_\_\_

Answer 4, 5 or 6

4. **Special Use Permits/Site Plan Approval.** An approval for a special use permit and/or site plan approval is hereby requested. In the space provided indicate the section(s) and classification(s) of the occupancy for which you are seeking a special use permit. Included all uses which are currently or will be in the subject property. All dimensions shall be listed in the space provided. Refer to the tables at the rear of the Zoning Ordinance for requirements in UR-3, SR-3, SR-3A and SR-3B districts. Additional sheets may be attached if required.

Section # \_\_\_\_\_

Classification of Occupancy requested \_\_\_\_\_

Description of what you are requesting: deli and grocery

Uses currently in property: deli and grocery

Monday through Saturday 6:00 AM to 11:30 PM

Title	Section Number	Required Dimensions	Actual Dimensions
Lot area			
Front yard			
Rear yard			
Side yard			
Side yard			
Parking			

*Answer this section only for multiple dwellings*

Lot coverage \_\_\_\_\_

Building height \_\_\_\_\_

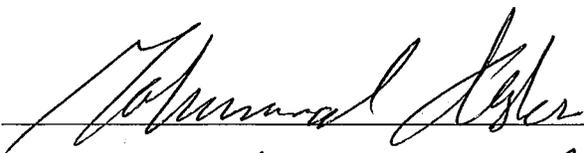
Open Space \_\_\_\_\_

Playlot \_\_\_\_\_

Livable floor area \_\_\_\_\_

Number of Bedrooms \_\_\_\_\_



Signature: 

Printed Name and Title: Mohammed Alshrofi

Date: 08-21-23



# APPLICATION

## PLANNING BOARD

### City of Middletown, New York

Date deemed complete \_\_\_\_\_  
Accepted by \_\_\_\_\_

Date \_\_\_\_\_

*Items 1, 2 and 3 are required to be completed*

1. Address of Subject Property 45-51 Academy Ave. Middletown, NY 10940

Section 35 Block 9 Lot 7 Current Zoning District R-2

Building Existing  New \_\_\_\_\_

2. Owner of Property Sound of Hope Radio Network

Owner's Address 23 Center Street

City Middletown State NY Zip 10940

Phone numbers: Home: 415 539 6068

Business: 415 539 6068

Cell: 415 539 6068

3. Applicant name No difference

*If different from Owner*

Applicants Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone numbers: Home: \_\_\_\_\_

Business: \_\_\_\_\_

Cell: \_\_\_\_\_

Fax: \_\_\_\_\_

Answer 4, 5 or 6

4. **Special Use Permits/Site Plan Approval.** An approval for a special use permit and/or site plan approval is hereby requested. In the space provided indicate the section(s) and classification(s) of the occupancy for which you are seeking a special use permit. Included all uses which are currently or will be in the subject property. All dimensions shall be listed in the space provided. Refer to the tables at the rear of the Zoning Ordinance for requirements in UR-3, SR-3, SR-3A and SR-3B districts. Additional sheets may be attached if required.

Section # 35-9-7

Classification of Occupancy requested Office use / Group B

Description of what you are requesting: We need to resegment the 2nd floor into offices and alter the current restroom to make it into two, and add another pair of restrooms. <sup>Work hours:</sup> 8am-11pm

Uses currently in property: Basement: Leased and used by Little Lotus Academy. First Floor: Leased and used by Little Lotus and ABCD Child Care. Second floor: empty and to be innovated. Third Floor: Leased and used by Little Lotus and Sound of Hope Studio and office.

Title	Section Number	Required Dimensions	Actual Dimensions
Lot area			
Front yard			
Rear yard			
Side yard			
Side yard			
Parking			

Answer this section only for multiple dwellings

Lot coverage \_\_\_\_\_  
Building height \_\_\_\_\_  
Open Space \_\_\_\_\_  
Playlot \_\_\_\_\_  
Livable floor area \_\_\_\_\_  
Number of Bedrooms \_\_\_\_\_



7. Sign at the Place Indicated

Signature: 

Printed Name and Title: Allen Yong Zeng, CEO, Sound of Hope  
Radio Network

Date: Sept 22, 2023